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APPLICANTS

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 ** CONTINUING DATA ***** *No. I.F.O.*

 ** FOREIGN APPLICATIONS ***** *No. I.F.O.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 68	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Gary Nelson</i> Examiner's Signature	<i>F.O.</i> Initials			

ADDRESS

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TITLE

Apparatus and method for detecting and correcting a corrupted broadcast time code

FILING FEE RECEIVED 2238	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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